



**Residential Appeal Narrative /  
Additional Documentation Form**

\_\_\_\_\_  
Appeal Year

\_\_\_\_\_  
Appeal Number

\_\_\_\_\_  
Property Index Number(s)

\_\_\_\_\_  
Owner / Taxpayer

\_\_\_\_\_  
Property Index Number(s)

\_\_\_\_\_  
Owner's Mailing Address

\_\_\_\_\_  
Property Street Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Township

\_\_\_\_\_  
Email Address

This form should be used to further explain the reason for appealing the assessment on your property. Use the space below to give a detailed explanation of the appeal. Use additional pages if necessary.

**Through my signature below, I affirm that I am the owner/lessee or appointed representative and that all information is true to the best of my knowledge.**

\_\_\_\_\_  
Signature of Owner/Lessee or Representative

\_\_\_\_\_  
Date



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Property Index Number(s)